
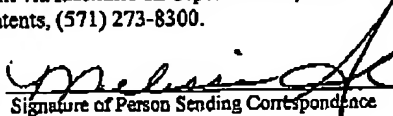


<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>PVI-5809</b>	
Applicant(s): <b>Jan Lau</b>						
Application No. <b>10/688,712</b>	Filing Date <b>October 17, 2003</b>	Examiner <b>David J. Isabella</b>	Customer No. <b>30452</b>	Group Art Unit <b>3738</b>	Confirmation No. <b>2202</b>	
Invention: <b>HEART VALVE LEAFLET LOCATOR</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	19 -	21 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	5 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <b>50-1225</b> in the amount of <b>\$120.00 (One Month Extension)</b> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>50-1225</b> . <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: <b>September 15, 2005</b>			
<b>David L. Hauser, Reg. No. 42,643</b> <b>Edwards Lifesciences LLC</b> <b>One Edwards Way</b> <b>Irvine, California 92614</b> <b>Telephone: (949) 250-6878</b> <b>Facsimile: (949) 250-6850</b>			<div style="border: 1px solid black; padding: 5px;">           I hereby certify that these papers and all enclosures are being sent via facsimile on September 15, 2005 to Commissioner for Patents, (571) 273-8300.              Signature of Person Sending Correspondence            _____  <b>Melissa Sanchez</b>            Typed or Printed Name of Person Sending Correspondence         </div>			
CC:						

Not Available Copy

Docket No. PVI-5809

**Certificate of Mailing/Transmission (37 C.F.R. § 1.8(a)):**

[ ] Pursuant to 37 C.F.R. § 1.8, I hereby certify that this paper and all enclosures are being deposited with the United States Postal Service as first class mail on the date indicated below in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[X] Pursuant to 37 C.F.R. § 1.6(d), I hereby certify that this paper and all enclosures are being sent via facsimile on the date indicated below to the attention of Examiner David J. Isabella at Facsimile No. (571) 273-8300.

Dated: September 15, 2005

Name of Person Certifying:

Printed Name:

Melissa Sanchez

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.: 10/688,712

Confirmation No. 2202

Applicant: Jan Lau

Filed: October 17, 2003

TC/A.U.: 3738

Examiner: David J. Isabella

Docket No.: PVI-5809

Customer No.: 30452

**AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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